

Application Data Sheet

Application Information

Application number::	
Filing Date::	03/23/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	UNIVERSAL HARMONIC BALANCER INSTALLATION KIT
Attorney Docket Number::	10628.00082
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	YES
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Danny
Middle Name::
Family Name:: Williams
Name Suffix::
City of Residence:: Clarinda
State or Province of Residence:: IA
Country of Residence:: USA
Street of mailing address:: Rural Route 1
City of mailing address:: Clarinda
State or Province of mailing address:: IA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 51632

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Daniel
Middle Name:: K.
Family Name:: Jasensky
Name Suffix::
City of Residence:: Morriston
State or Province of Residence:: FL
Country of Residence:: USA
Street of mailing address:: 5350 SE 122nd Avenue
City of mailing address:: Morriston

State or Province of mailing address:: FL
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 32668

Correspondence Information

Correspondence Customer Number:: 22908

Representative Information

Representative Customer Number:: 22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Lisle Corporation
Street of mailing address:: 807 East Main Street
City of mailing address:: Clarinda
State or Province of mailing address:: IA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 51632-0089